## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10726808

| CLAIMS AS FILED - PART I   |  |   |                  |   |                  | SMALL ENTITY |                        |                  | OTHER THAN          |                        |
|--|--|---|------------------|---|------------------|--------------|------------------------|------------------|---------------------|------------------------|
| Τ(   | OTAL CLAIMS                                    | <u> </u>                                  | (Column          | 1) (Con                                     | umn 2)           | TYPE [       |                        | OR<br><b>1</b> 1 |                     | ·                      |
| _  |  |   | 1                |   |                  | RATE         | FEE                    | ┦ ′              | RATE                | FEE                    |
| FC   | OR   |   | NUMBER           | FILED NUM                                   | BER EXTRA        | BASIC FEE    | 385.00                 | OR               | BASIC FEE           | 770.00                 |
| TC   | OTAL CHARGEA                                   | ABLE CLAIMS                               | 2-7 mir          | ∂ / minus 20= *                             |                  | X\$ 9=       | l                      | OR               | X\$18=              | 126                    |
| <b> </b>   | DEPENDENT CL                                   |   |                  | 5 minus 3 =   2                             |                  | X43=         |                        | OR               | X86=                | 117                    |
| ML   | JLTIPLE DEPEN                                  | NDENT CLAIM PF                            | RESENT           |   |                  | +145=        |                        | OR               | +290=               | 1                      |
| * If   | the difference                                 | in column 1 is                            | less than ze     | ero, enter "0" in (                         | column 2         | TOTAL        |                        | OR               | TOTAL               | 1065                   |
| CLAIMS AS AMENDED - PART II  |  |   |                  |   |                  |              |                        | •                | OTHER               |                        |
| _  | <del>,</del>                                   | (Column 1)                                | <del></del>      | (Column 2)                                  | (Column 3)       | SMALL        |                        | OR               | SMALLE              | ,                      |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RATE         | ADDI-<br>TIONAL<br>FEE |                  | RATE                | ADDI-<br>TIONAL<br>FEE |
| NON  | Total  | *   | Minus            | **  | =                | X\$ 9=       |                        | OR               | X\$18=              |                        |
| AME  | Independent                                    | *   | Minus            | ***   | =                | X43=         |                        | OR               | X86=                |                        |
|  | FIRST PRESE                                    | NIAHUN UF INIC                            | JETIPLE DEF      | PENDENT CLAIM                               |                  | +145=        |                        | OR               | +290=               |                        |
|  |  |   |                  |   |                  | TOTAL        |                        | OP               | TOTAL               |                        |
|  |  | (Column 1)                                |                  | (Column 2)                                  | (Column 3)       | ADDIT. FEE   |                        | , ··· ,          | ADDIT. FEE <b>L</b> |                        |
| m  |  | CLAIMS<br>REMAINING                       |                  | HIGHEST<br>NUMBER                           |                  |              | ADDI-                  | 1                |                     | ADDI-                  |
| AMENDMENT B  |  | AFTER<br>AMENDMENT                        |                  | PREVIOUSLY<br>PAID FOR                      | PRESENT<br>EXTRA | RATE         | TIONAL<br>FEE          |                  | RATE                | TIONAL<br>FEE          |
| NDN  | Total  | *   | Minus            | **  | =                | X\$ 9=       |                        | OR               | X\$18=              |                        |
| AME  | Independent                                    | *   | Minus            | ***   | -                | X43=         |                        | OR               | X86=                |                        |
| لـــا  | FIRST PRESE                                    | NTATION OF MU                             | LIPLE DEP        | ENDENT CLAIM                                |                  | +145=        |                        | OR               | +290=               |                        |
|  |  |   |                  |   |                  | TOTAL        | ———                    | L                | TOTAL               |                        |
|  |  | (0.1 4)                                   |                  | · · · · · · · · · · · · · · · · · · ·       |                  | ADDIT. FEE   |                        | OR ,             | ADDIT. FEE          |                        |
|  | ·  | (Column 1) CLAIMS                         |                  | (Column 2)<br>HIGHEST                       | (Column 3)       | F            | -221                   | ſ                |                     |                        |
| AMENDMENT C  |  | REMAINING<br>AFTER<br>AMENDMENT           |                  | NUMBER<br>PREVIOUSLY<br>PAID FOR            | PRESENT<br>EXTRA | RATE         | ADDI-<br>TIONAL<br>FEE |                  | RATE                | ADDI-<br>TIONAL<br>FEE |
| NOW [  | Total  | *   | Minus            | **  | = .              | X\$ 9=       |                        | OR               | X\$18=              |                        |
| AME  | Independent                                    | <u> </u>                                  | Minus            | ***   | =                | X43=         |                        | OR               | X86=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                  |   |                  |              |                        | ı                |                     |                        |
| * P  | f the entry in colur                           | mn 1 is less than th                      | e entry in colur | mn 2 write "O" in co                        | iumn 3           | +145=        | (                      | OR               | +290=               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                  |   |                  |              |                        |                  |                     |                        |